

What Is EPSDT?

EPSDT is Medicaid's comprehensive and preventive health program for children and adolescents under 21 years old.

E Early

Assessing and identifying problems early.

P Periodic

Checking children's health at periodic, age-appropriate intervals.

S Screening

Providing physical, mental, developmental, dental, hearing, vision and other screening tests to detect potential problems.

D Diagnostic

Performing diagnostic tests to follow up when a risk is identified.

T Treatment

Control, correct, or reduce health problems found.

The EPSDT program is designed to assure that children receive early detection and care, so that health problems are averted or diagnosed and treated as early as possible.



If there are questions about the EPSDT program or any other services provided by NH Healthy Families please call at **866-769-3085**.

EPSDT – a Medicaid Benefit for Children and Adolescents



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nh healthy families™

New Hampshire Medicaid Covered and Non-covered services are identified in Chapter He-W 500 of the State of NH, Administrative Rules. (found at http://gencourt.state.nh.us/rules/state_agencies/he-w500.html) These services must adhere to the following requirements:

- Medical necessity
- The purpose of the service is not *primarily* for the convenience of the recipient or recipient family, care giver or provider
- The service is not experimental, investigational, cosmetic or duplicative
- The service is not more costly than other items or services that would produce the same results



EPSDT consists of mandatory services and benefits including:

- 1.** Screening guidelines developed by the American Academy of Pediatrics/Bright Futures, and adopted by the State of NH, Department of Health and Human Services. Refer to the “Recommendations for Preventive Pediatric Health Care” (https://www.aap.org/en-us/Documents/periodicity_schedule.pdf)

Screening services must include the following elements:

- Physical exams
- Immunizations
- Lab tests
- Comprehensive health and developmental history
- Health education
- Hearing testing
- Vision testing
- Dental screening

- 2.** Any diagnostic or treatment services, prescribed by a licensed health care provider, in accordance with generally accepted standards of medical practice as a result of assessments and screenings completed.

- 3.** Medicaid defines “Medically Necessary” for the EPSDT population differently and more broadly than for the rest of the Medicaid population.

“Reasonably calculated to prevent, diagnose, correct, cure, alleviate, or prevent the worsening of conditions that endanger life, cause pain, result in illness or infirmity, threaten to cause or aggravate a handicap or cause a physical deformity or malfunction and no equally effective course of treatment is available or suitable for the EPSDT recipient requesting a medically necessary service.”

To determine the medical necessity of a service that is listed as non-covered or is beyond the scope of usual and assessments, a Prior Authorization (PA) is required. The process to submit PA’s is included on the NHHF Website (www.NHhealthyfamilies.com) and in the Provider Manual. It is completed by the provider.